



**HAWAII STATE ETHICS COMMISSION**  
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P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
email: [ethics@hawaiiethics.org](mailto:ethics@hawaiiethics.org)

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STATE ETHICS COMMISSION

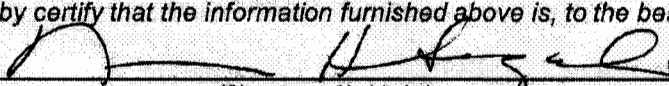
## LOBBYIST REGISTRATION FORM

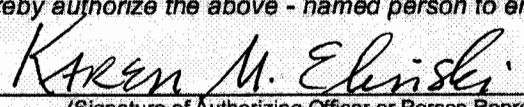
(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
SUZUKI	NORMAN	H	(808) 521-2661
MAILING ADDRESS (Street)			FAX
1188 Bishop Street, Suite 1805			(808) 521-2663
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Suzuki & Goo, Attorneys, A Law Corporation			(808) 521-2661
MAILING ADDRESS (Street)			FAX
1188 Bishop Street, Suite 1805			(808) 521-2663
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
TEACHERS INSURANCE AND ANNUITY ASSOCIATION COLLEGE RETIREMENT EQUITIES FUND		(212) 490-9000
MAILING ADDRESS (Street)		FAX
730 Third Avenue		(212) 916-5952
(City)	(State)	(Zip Code)
New York	New York	10017-3206
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Karen M. Elinski		(212) 916-6476
MAILING ADDRESS (Street)		FAX
730 Third Avenue		(212) 916-5952
(City)	(State)	(Zip Code)
New York	New York	10017-3206

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development	
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation	
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation	
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>Retirement</u>	
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	<u>plan options</u>	

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
 (Signature of Lobbyist)	1/6/05 (Date)

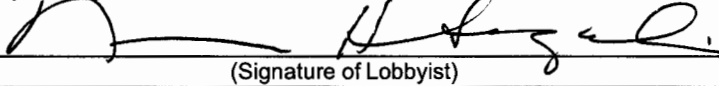
PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Karen M. Elinski	Senior Counsel	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
TEACHERS INSURANCE AND ANNUITY ASSOCIATION COLLEGE RETIREMENT EQUITIES FUND	(212) 490-9000	
MAILING ADDRESS (Street)	FAX	
730 Third Avenue	(212) 916-5952	
(City)	(State)	(Zip Code)
New York	New York	10017-3206
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.		
 (Signature of Authorizing Officer or Person Represented)	1/7/05 (Date)	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>Retirement</u> <u>plan options</u>
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/6/05

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Karen M. Elinski		Senior Counsel	
NAME OF ORGANIZATION (if applicable) TEACHERS INSURANCE AND ANNUITY ASSOCIATION COLLEGE RETIREMENT EQUITIES FUND		TELEPHONE (212) 490-9000	
MAILING ADDRESS (Street) 730 Third Avenue		FAX (212) 916-5952	
(City) New York	(State) New York	(Zip Code) 10017-3206	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
(Signature of Authorizing Officer or Person Represented)		(Date)	